

**NORTH CAROLINA STATE HISTORIC PRESERVATION OFFICE**  
**Office of Archives and History**  
**Department of Cultural Resources**

**NATIONAL REGISTER OF HISTORIC PLACES**

**City Hospital – Gaston Memorial Hospital**

Gastonia, Gaston County, GS1539, Listed 12/7/2011

Nomination by Heather Fearnbach

Photographs by Heather Fearnbach, October 2011



1924 City Hospital Building



1951 Hospital Building

United States Department of the Interior  
National Park Service

## National Register of Historic Places Registration Form

This form is for use in nominating or requesting determinations for individual properties and districts. See instructions in *How to Complete the National Register of Historic Places Registration Form* (National Register Bulletin 16A). Complete each item by marking "x" in the appropriate box or by entering the information requested. If an item does not apply to the property being documented, enter "N/A" for "not applicable." For functions, architectural classification, materials, and areas of significance, enter only categories and subcategories from the instructions. Place additional entries and narrative items on continuation sheets (NPS Form 10-900a). Use a typewriter, word processor, or computer, to complete all items.

### 1. Name of Property

historic name City Hospital - Gaston Memorial Hospital

other names/site number N/A

### 2. Location

street & number 401-405 North Highland Street, 810 Mauney Avenue

**N/A** not for publication

city or town Gastonia

**N/A** vicinity

state North Carolina

code NC

county Gaston

code 071

zip code 28052

### 3. State/Federal Agency Certification

As the designated authority under the National Historic Preservation Act, as amended, I hereby certify that this ☒ nomination  
☐ request for determination of eligibility meets the documentation standards for registering properties in the National Register of  
Historic Places and meets the procedural and professional requirements set for in 36 CFR Part 60. In my opinion, the property  
☒ meets ☐ does not meet the National Register criteria. I recommend that this property be considered significant ☐ nationally  
☐ statewide ☒ locally. (See continuation sheet for additional comments.)

Signature of certifying official/Title

Date

North Carolina Department of Cultural Resources

State or Federal agency and bureau

In my opinion, the property ☐ meets ☐ does not meet the National Register criteria. (☐ See Continuation sheet  
for additional comments.)

Signature of certifying official/Title

Date

State or Federal agency and bureau

### 4. National Park Service Certification

I hereby certify that the property is:

☐ entered in the National Register.

☐ See continuation sheet

☐ determined eligible for the  
National Register.

☐ See continuation sheet

☐ determined not eligible for the  
National Register.

☐ removed from the National  
Register.

☐ other, (explain:) \_\_\_\_\_

Signature of the Keeper

Date of Action

City Hospital - Gaston Memorial Hospital  
Name of Property

Gaston, NC  
County and State

## 5. Classification

### Ownership of Property

(Check as many boxes as apply)

- ☐ private  
☒ public-local  
☐ public-State  
☐ public-Federal

### Category of Property

(Check only one box)

- ☒ building(s)  
☐ district  
☐ site  
☐ structure  
☐ object

### Number of Resources within Property

(Do not include previously listed resources in count.)

Contributing	Noncontributing	
2	0	buildings
0	0	sites
0	0	structures
0	0	objects
2	0	Total

### Name of related multiple property listing

(Enter "N/A" if property is not part of a multiple property listing.)

N/A

### Number of Contributing resources previously listed in the National Register

N/A

## 6. Function or Use

### Historic Functions

(Enter categories from instructions)

HEALTH CARE: Hospital

### Current Functions

(Enter categories from instructions)

VACANT: Not in use

## 7. Description

### Architectural Classification

(Enter categories from instructions)

Classical Revival

Modern Movement

### Materials

(Enter categories from instructions)

foundation BRICK

walls BRICK

roof ASPHALT

RUBBER

other

### Narrative Description

(Describe the historic and current condition of the property on one or more continuation sheets.)

## 8. Statement of Significance

### Applicable National Register Criteria

(Mark "x" in one or more boxes for the criteria qualifying the property for National Register listing.)

- ☒ **A** Property is associated with events that have made a significant contribution to the broad patterns of our history.
- ☐ **B** Property is associated with the lives of persons significant in our past.
- ☒ **C** Property embodies the distinctive characteristics of a type, period, or method of construction or represents the work of a master, or possesses high artistic values, or represents a significant and distinguishable entity whose components lack individual distinction.
- ☐ **D** Property has yielded, or is likely to yield, information important in prehistory or history.

### Criteria Considerations

(Mark "x" in all the boxes that apply.)

Property is:

- ☐ **A** owned by a religious institution or used for religious purposes.
- ☐ **B** removed from its original location.
- ☐ **C** a birthplace or grave.
- ☐ **D** a cemetery.
- ☐ **E** a reconstructed building, object, or structure.
- ☐ **F** a commemorative property
- ☐ **G** less than 50 years of age or achieved significance within the past 50 years.

### Areas of Significance

(Enter categories from instructions)

Architecture

Health/Medicine

### Period of Significance

1924-1961

### Significant Dates

1924

1947

1951

1957

(Complete if Criterion B is marked)

N/A

### Cultural Affiliation

N/A

### Architect/Builder

Charles Coker Wilson, architect, 1924 building

Walter Hook and Associates, architect, 1951 building

### Narrative Statement of Significance

(Explain the significance of the property on one or more continuation sheets.)

## 9. Major Bibliographical References

### Bibliography

(Cite the books, articles, and other sources used in preparing this form on one or more continuation sheets.)

### Previous documentation on file (NPS):

- ☐ preliminary determination of individual listing (36 CFR 67) has been requested
- ☐ previously listed in the National Register
- ☐ Previously determined eligible by the National Register
- ☐ designated a National Historic Landmark
- ☐ recorded by Historic American Buildings Survey # \_\_\_\_\_
- ☐ recorded by Historic American Engineering Record \_\_\_\_\_

### Primary location of additional data:

- ☒ State Historic Preservation Office
- ☐ Other State Agency
- ☐ Federal Agency
- ☐ Local Government
- ☐ University
- ☒ Other

Name of repository: Gaston County Library, Gastonia

City Hospital - Gaston Memorial Hospital  
Name of Property

Gaston County, NC  
County and State

## 10. Geographical Data

**Acreage of Property** Approximately 2.49 acres

### UTM References

(Place additional UTM references on a continuation sheet.)

1    17    482240    3902740  
      Zone    Easting    Northing  
2    \_\_\_\_\_

3    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_  
      Zone    Easting    Northing  
4    \_\_\_\_\_  
      See continuation sheet

### Verbal Boundary Description

(Describe the boundaries of the property on a continuation sheet.)

### Boundary Justification

(Explain why the boundaries were selected on a continuation sheet.)

## 11. Form Prepared By

name/title Heather Fearnbach  
organization Fearnbach History Services, Inc. date 3/4/2011  
street & number 3334 Nottingham Road telephone 336-765-2661  
city or town Winston-Salem state NC zip code 27104

### Additional Documentation

Submit the following items with the completed form:

### Continuation Sheets

### Maps

A **USGS map** (7.5 or 15 minute series) indicating the property's location

A **Sketch map** for historic districts and properties having large acreage or numerous resources.

### Photographs

Representative **black and white photographs** of the property.

### Additional items

(Check with the SHPO or FPO for any additional items.)

## Property Owner

(Complete this item at the request of SHPO or FPO.)

name Jan Winters, County Manager, Gaston County  
street & number P. O. Box 1578 telephone \_\_\_\_\_  
city or town Gastonia state NC zip code 28053

**Paperwork Reduction Act Statement:** This information is being collected for applications to the National Register of Historic Places to nominate properties for listing or determine eligibility for listing, to list properties, and to amend existing listing. Response to this request is required to obtain a benefit in accordance with the National Historic Preservation Act, as amended (16 U.S.C. 470 *et seq.*)

**Estimated Burden Statement:** Public reporting burden for this form is estimated to average 18.1 hours per response including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding this burden estimate or any aspect of this form to the Chief, Administrative Services Division, National Park Service, P. O. Box 37127, Washington, DC 20013-7127; and the Office of Management and Budget, Paperwork Reduction Projects (1024-0018), Washington, DC 20303.

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City Hospital – Gaston Memorial Hospital  
Gaston County, NC

## Section 7. Narrative Description

### Setting

City Hospital - Gaston Memorial Hospital is located northwest of downtown Gastonia at the northwest corner of North Highland Street and Mauney Avenue. The complex, which contains the 1924 City Hospital, the 1951 Gaston Memorial Hospital, and the 1957 addition that connects them, as well as a 1947 nurses' school and dormitory, occupies a 2.49-acre parcel owned by Gaston County. The area surrounding the hospital is primarily residential, but also contains commercial, institutional, and religious buildings.

The hospital's façade faces east toward North Highland Street and the nurses' building is oriented toward Mauney Avenue with the main entrance on its south elevation. Concrete sidewalks lead from the asphalt parking lots east and west of the buildings to the entrances. Brick, stone, and concrete retaining walls ameliorate the grade change in the landscaped areas and parking lots west of the 1924 building. A tall stone wall delineates the south end of the parcel's western property line. Landscaping includes deciduous trees and evergreen foundation plantings.

### City Hospital - Gaston Memorial Hospital, 1924, 1947, 1951, 1957, 401-405 North Highland Street Contributing Building

The hospital's original section, erected in 1924, stands at the northwest corner of North Highland Street and Mauney Avenue. The imposing four-story brick edifice is twelve bays wide and three bays deep and features Classical Revival-style elements including a flat-roofed east entrance portico with a denticulated cornice and paired Tuscan columns, a metal cornice with a tall frieze below square modillions, and slightly recessed round-arched surrounds on the façade's first story. The main block's remaining window openings have flat soldier-course lintels. All of the window openings in the 1924 building originally contained one-over-one double-hung sash.

The fourth story, which rises above the metal cornice, is slightly shorter than the lower three levels. A continuous soldier-course band surmounts the fourth-floor windows. Metal coping caps the flat parapet walls.

The east entrance door and sidelights are replacements and its transom has been enclosed with plywood. The brick quoin detail at the main block's south end is repeated on the west elevation's slightly-projecting central stair and elevator tower bay. A flat-roofed metal canopy shelters the rear (west) entrance.

Shallow wings on the hospital's north and south ends initially served as sunporches and were illuminated by large double-hung windows flanked by narrow double-hung sidelights. Operable louvered shutters



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allowed for ventilation and light control. The third floor features segmental-arched window surrounds. The wings were initially only three stories tall, but a fourth floor was added above the cornice between 1930 and 1950, making them the same height as the main block.<sup>1</sup> A one-story brick hyphen constructed in 1951 connected the 1924 and 1951 buildings, but was removed along with the north wing in 1956 to make room for the four-story addition between the two buildings, which was completed in early 1957.

The county enclosed the windows in the 1924 building and the 1947 nurses' school, removing the wood double-hung window sashes and frames and infilling the window openings with brick, shortly after the hospital moved to its new location 1973 to facilitate their use of the space as offices. Metal single-leaf doors were installed in the south wing's central window bays and a four-story metal fire escape added at that time to provide an emergency exit.

The rehabilitation contractor removed the bricks from the façade and south elevation's second stories and the west elevation's first and second stories in late August 2011. The remaining windows will be opened during the course of the renovation, and one-over-one, double-hung, wood-sash windows that match those illustrated in a historic photograph will be installed throughout the building.

The 1924 building's interior has been remodeled several times, but the original floor plan remains substantially intact. The east entrance opens into a small foyer with a reception desk behind an aluminum-framed glass window on its south side. The long central corridor runs north/south and is flanked by offices, restrooms, storage rooms, and a mechanical room of various sizes. The first and second floors were used as county office space until 2005 and were thus updated with dropped acoustical tile ceilings, fluorescent lighting, commercial carpeting, and wallcoverings ranging from wallpaper to faux-wood sheet paneling. The door surrounds are original, but replacement doors have been installed in most locations and the transoms have been covered.

The third and fourth floors manifest a higher degree of integrity as they were utilized primarily as storage for many years. Most areas retain plaster walls and ceilings, wood baseboards, slightly-recessed panels in the wood door and transom surrounds, and original wood doors. Many transoms are still operable. The vinyl tile floors were added and the bathrooms updated as part of the 1951 and 1970s renovations. The building's exterior terra cotta block walls and interior wood-framed partition walls are visible in some areas with spalling and missing plaster. The room that historically served as an operatory at the fourth-floor's northeast corner retains a small hexagonal tile floor and tile baseboards, while marble wainscoting sheaths the nearby bathroom's walls.

The four-story, brick, 1951 Gaston Memorial Hospital, erected north of the 1924 building, epitomizes mid-twentieth-century hospital construction. The expansive building is five bays wide and nineteen bays

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<sup>1</sup> It is likely that the end wings' fourth stories were added in 1947 when the nurses' building was erected.

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deep. The Modernist façade's three-bay central section projects slightly farther east than the 1924 hospital and then steps back, with the building's mass extending to the west. The variegated Roman brick veneer is laid in running bond with the exception of the cornice, which consists of concave header sections separated by stretcher columns, creating an undulating effect. Pre-cast concrete coping caps the flat-parapet walls.

Pre-cast concrete walls support the flat-roofed, copper-edged, reinforced-concrete canopy that shelters the façade's first story. The projecting entrance vestibule features an aluminum-framed, double-leaf, plate-glass door flanked by matching sidelights and a three-part transom. One original Modernist sconce with a black metal body and an opaque white glass globe remains on the door's north side. Pink marble wainscoting sheathes the vestibule's interior side walls.

Aluminum-framed curtain walls with large square glass panes illuminate the lobby. The curtain wall that wraps around the lobby's northeast corner is four panes tall and three panes wide on the east elevation and four panes wide on the north elevation. The curtain wall at the lobby's southeast corner was originally identical. Although this section remains the same height, the curtain wall's east elevation width has been increased to five panes and the south elevation enclosed.

The extra space created by the shorter curtain wall at the entrance vestibule's north end is open. A concrete pilaster and square concrete column support the canopy's north end. Central concrete steps and a concrete ramp with a metal railing provide access to the slate entrance terrace. The concrete planters at the terrace's outer edges serve a dual function as retaining walls.

Concrete is also used to frame the tall, narrow window bands on the projecting entrance bay's upper three floors. Each band encompasses three double-hung, aluminum-framed sash separated by two pale green spandrel panels.

The window openings on the 1951 building's side and rear elevations also contain aluminum-framed sash, but are more simply finished, with concrete sills serving as their sole embellishment. The window fenestration is regular with the exception of groups of six small, square, glass blocks that illuminate each level of the stair halls close to the north elevation's east end and the south elevation's west end. The site's grade slopes to the west, which allowed for the installation of basement windows and doors near the building's west end. Some of the window air conditioning units that cooled the building are still in place. Metal gutters move water from the roof to French drains around the building's perimeter.

The shallow two-story bay that extends from the 1951 building's rear (west) elevation is pierced by three windows on each of the upper two stories but the west wall is blind at the basement level, as the space, which is adjacent to the kitchen, originally contained refrigerators and food preparation areas. The sub-



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basement foundation wall is concrete. Concrete steps provide access to the below-grade sub-basement entrance.

A flat-roofed, copper-edged, reinforced-concrete canopy shelters the double-leaf entrance near the 1951 building's southeast corner. Concrete steps lead to a concrete landing outside the entrance. The entrance on the east side of the flat-roofed, one-story-on-basement emergency room wing that projects from the south elevation is protected by an identical canopy. Concrete steps and a concrete ramp with a metal pipe railing provide access to the doors that lead into the emergency room suite and the 1951 building. The emergency room wing was constructed in 1957, at the same time as the four-story, six-bay-wide addition that connects the 1924 and 1951 buildings. The 1957 additions are almost identical in exterior appearance to the 1951 building's secondary elevations.

The four-story 1957 connector's interior configuration is evident from the exterior. Pairs of aluminum-framed one-over-one sash windows with concrete sills illuminate each of the three patient rooms flanking both sides of the upper three floors' central corridors. The first floor's south elevation contains four windows in the three offices on the corridor's south side, while high horizontal windows light the canteen on the corridor's north side. A flat-roofed, copper-edged, reinforced-concrete canopy shelters the single-leaf entrance at the connector's northwest corner.

The 1957 emergency room wing's first floor encompasses an office, a sizable exam room, a medicine dispensary, a storage closet, and a restroom. The sloping grade also allowed for a full basement, accessed through a double-leaf door on the west elevation. The basement contains two large storage rooms and a transformer room.

The 1951 and 1957 buildings also have similar interior finishes including plaster walls, terrazzo floors and baseboards, and built-in closets, cabinets, lockers, and reception desks, many of which are still intact despite later remodeling campaigns and a series of fires. The 1951 hospital's basement encompassed storage areas, the autopsy room, and the kitchen. The first floor's eastern end served a primarily administrative function, with a rectangular corridor surrounding a central row of small rooms—an admitting room, a superficial therapy room, a waiting room, restrooms—as well as the elevator tower and a stair hall. Parallel east-west corridors provided access to offices, a waiting room, and the canteen. The emergency room wing projected from the south elevation's center, and the floor's southwest corner contained the staff dining room, locker rooms, and lounges. The rooms lining the north elevation's west end housed laboratories, the radiology department, and the pharmacy. Stair halls near the building's northeast and southwest corners lead to the upper floors.<sup>2</sup>

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<sup>2</sup> James L. Beam and Associates, architects, "Proposed Alterations and Conversions, Old Gaston Memorial Hospital Mental Health Facility," undated plans, 1970s.

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On the second floor, the rectangular corridor provided access to the central nurses' stations, utility rooms, and bathrooms, as well as the patient rooms lining the building's exterior walls. The third floor's east end also housed patients, while the west end contained operating, treatment, storage, and locker rooms. The fourth floor had a similar arrangement, with the west end serving as the maternity ward (labor and delivery rooms and nurseries).<sup>3</sup>

The operating rooms and corridors in the surgical suites employed the most up-to-date design of the 1950s. The lower three-quarters of the walls are sheathed in pale green spandrel glass tiles, which was not only an easily disinfected surface but was intended to reduce glare and the potential for eye strain. The floors are "non-conductive" composite tile, which eliminated the danger of fire from equipment sparks. Steam and high-temperature instrument sterilizers, stainless steel warming cabinets for fluids and blankets, built-in stainless steel and glass storage cabinets, and stainless steel swinging doors in the surgical areas also contributed to the hospital's efforts to maintain a hygienic environment.<sup>4</sup> These significant interior features are still intact.

## Nurses' School and Dormitory, 1947, Contributing Building, 810 Mauney Avenue

The two-story-on-basement brick nurses' school and dormitory stands on the west side of the 1924 hospital. The flat-roofed rectangular building is three bays wide and seven bays deep. The site's slope to the west allows the basement elevation to be fully exposed on the west elevation.

The nurses' school and dormitory emulates the 1924 hospital's design in its Classical Revival features such as the wood cornice with a tall frieze; the raised-panel door, five-pane sidelights, and fanlight within the main entrance's three-centered-arch surround; and the brick quoins at the building's corners. The sidelights have been covered with exterior wood panels and the fanlight with an interior panel for security purposes, but the panels will be removed during the rehabilitation.

An almost-full-width, one-story, flat-roofed front porch supported by square brick posts spanned by a solid brick kneewall extends across the façade (south elevation). The porch retains its original wood cornice, beadboard ceiling, and a terra cotta tile floor. A matching portico shelters the rear (north) entrance bay. A double-leaf metal door and an aluminum-framed glass door provide access to the basement from the west elevation.

Flat soldier-course lintels surmount the first- and second-story windows and a continuous soldier-course band capped with an all-header band wraps around the building's north, west, and south elevations above the basement's windows and doors. The county removed the original double-hung wood-sash windows

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<sup>3</sup> Ibid.

<sup>4</sup> "Hospital Operating Rooms are Scientific and Safe," *The Gastonia Gazette*, September 28, 1951, page A10.

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and enclosed the window openings with brick shortly after the hospital moved to its new location in 1973 to facilitate their new use of the space as offices. The rehabilitation contractor removed the bricks from the south and east elevation's second stories and the west elevation's first and second stories in late August 2011 and temporarily boarded-up the openings. The remaining windows will be opened during the course of the renovation, and six-over-six, double-hung, wood-sash windows that match those illustrated in a historic photograph will be installed throughout the building.

The building's interior has been remodeled several times, but the original floor plan remains substantially intact. The south entrance opens into a small foyer and a central corridor that runs north/south to the rear entrance and is flanked by offices, restrooms, storage rooms, and conference rooms of various sizes. The building was used as county office space until 2005 and was thus updated with dropped acoustical tile ceilings, fluorescent lighting, commercial carpeting, and faux-wood sheet paneling on the walls. The door surrounds are intact, but the door opening size has been reduced and replacement doors installed at most locations. However, a few raised-horizontal-panel doors remain in closets and in the interior partition walls between rooms. The central, open stair, with its simple wood railing comprised of square newel posts, narrow rectangular balusters, and a molded handrail, is also original. The stair rises from south to north in a straight run. Some partition walls were added in the basement to create a mechanical room and storage rooms and the area was finished in the same manner as the first and second floors.

## Integrity Statement

The City Hospital – Gaston Memorial Hospital retains a high degree of integrity in terms of location, workmanship, feeling, and association. The character-defining Classical Revival-style architectural elements of the 1924 hospital and the 1947 nurses' school and the Modernist features of the 1951 hospital and the 1957 addition are substantially intact.

Gaston County's circa 1973 enclosure of the windows in the 1924 hospital and the 1947 nurses' school, which involved removing the wood double-hung window sashes and frames and infilling the window openings with brick, has diminished the architectural integrity of those buildings. However, the rehabilitation contractor removed some brick infill in late August 2011 and the remaining windows will be opened and new wood double-hung windows installed as part of the complex's adaptive reuse to serve as affordable housing

The 1924 building's interior has been remodeled several times, but retains the original floor plan. The third and fourth floors manifest the highest degree of integrity as they were utilized primarily as storage for many years. Most areas have plaster walls and ceilings, wood baseboards, slightly-recessed panels in the wood door and transom surrounds, and original wood doors.

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The 1951 and 1957 buildings' interior finishes include plaster walls, terrazzo floors and baseboards, and built-in closets, cabinets, lockers, and reception desks, many of which are still extant despite later remodeling campaigns and a series of fires. The 1951 hospital's operating rooms and corridors in the surgical suites reflect progressive 1950s institutional design in their pale green spandrel glass tile wall sheathing, "non-conductive" composite floor tiles, built-in stainless steel and glass storage cabinets, and stainless steel swinging doors.

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## Section 8. Statement of Significance

The City Hospital - Gaston Memorial Hospital complex is locally significant for the medical care it provided in the Gastonia area. Its history reflects improvements in medical services for more than thirty-five years and the important changes in its administration between 1924 and 1961. The buildings are architecturally important as they feature distinctive characteristics of hospital design from 1924 to 1957. Therefore, the property meets National Register Criteria A for health and medicine and C for architecture.

City Hospital began operating as a small privately-owned institution in a downtown Gastonia dwelling in 1908 and quickly grew in physical size and mission. By 1924, when the hospital occupied a new four-story building on North Highland Street, the facility encompassed a nurses' training school and served as the surgical hospital for the general public as well as the Southern, Piedmont and Northern, and Chicago and Northwestern railways. The institution remained one of the largest in the region through the 1930s and was in dire need of additional space by the early 1940s.

In hopes that public ownership would provide the means to improve conditions, Gaston American Legion Post No. 23 coordinated a fundraising effort to purchase City Hospital and conveyed it to Gaston County in 1946. The facility was renamed Gaston Memorial Hospital in honor of the county's approximately 330 World War II veterans and a nonprofit corporation with a twelve-member board of trustees was created to oversee the hospital's management. The new ownership status and organizational structure made it possible for the institution to benefit from the federal, state, and local funding made available by the Hill-Burton Act of 1946, which provided for health care facility improvements throughout the nation. Gaston Memorial Hospital's 1951 building was erected as part of the ensuing hospital modernization campaign. When completed, the new 150-bed hospital featured five "scientifically-equipped" operating rooms, private and semi-private rooms for up to four patients, central nursing stations on each floor, a fourth-floor maternity ward with three nurseries, a laboratory, an x-ray department, a medical library, and a kitchen. By 1955 the hospital staff included more than seventy physicians and fifty nurses.<sup>5</sup>

In addition to its historical significance, City Hospital – Gaston Memorial Hospital contains intact local examples of Classical Revival-style and Modernist institutional buildings. The hospital complex reflects both the design standards of the 1920s, intended to result in buildings that were commanding in appearance as well as fireproof and hygienic, and changes in medical technology, theory, and practice that coalesced with the desire for a fresh, progressive image for new facilities in the 1950s. Columbia, South Carolina architect Charles Coker Wilson's design for the four-story City Hospital erected on North

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<sup>5</sup> "Ceremonies Saturday Open Hospital," *The Gastonia Gazette*, September 28, 1951, page A1; "Hospital Operating Rooms are Scientific and Safe," *The Gastonia Gazette*, September 28, 1951, page A10; Bob Hallman, "Gaston Memorial Almost Finished," *The Gastonia Gazette*, March 21, 1951, pages A1 and 8. Fred C. Hubbard Jr., "Administrator Lauds Section on Facilities," *The Gastonia Gazette*, September 28, 1951, page A1; "Gaston Memorial's Saga Monument to Public," *The Gastonia Gazette*, February 21, 1955.

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Highland Street in 1923-1924 manifests classical architectural elements that evoke a sense of tradition and permanence. The imposing brick edifice features a metal cornice with a tall frieze below square modillions, a flat-roofed east entrance portico supported by paired Tuscan columns, and slightly recessed round-arched window surrounds on the façade's first story. The 1947 Nurses' School and Dormitory emulates the 1924 hospital's design in its Classical Revival features such as the tall wood cornice; the raised-panel door, five-pane sidelights, and fanlight within the main entrance's three-centered-arch surround; and the brick quoins at the building's corners.

Walter Hook and Associates of Charlotte, a firm with many mid-twentieth-century hospital commissions, designed the 1951 Gaston Memorial Hospital building, which displays the sleek lines, smooth facades, flat-roofed entrance canopies, and aluminum-framed plate-glass windows, doors, and curtain walls that characterize the Modernist design aesthetic and present an up-to-date image. The four-story, six-bay-wide addition that connects the 1924 and 1951 hospitals and the small emergency room wing that extends from the 1951 building's south elevation were constructed in 1957 and are almost identical in exterior appearance to the 1951 building's secondary elevations. The 1951 hospital's operating rooms and corridors in the surgical suites reflect progressive 1950s institutional design in their pale green spandrel glass tile wall sheathing, "non-conductive" composite floor tiles, built-in stainless steel and glass storage cabinets, and stainless steel swinging doors.

The hospital's period of significance begins in 1924 with the construction of the Classical Revival-style building, and continues through 1961. This period takes into account the construction of the 1957 one-story brick emergency room wing and the four-story brick addition connecting the 1924 and 1951 buildings. The City Hospital - Gaston Memorial Hospital continued to function at this location until moving to a new facility in 1973, however, the period after 1961 is not of exceptional significance. Therefore, the period of significance ends at the fifty-year cut-off date for the historic time period.

## Historical Background and Health/Medicine Context

Gastonia's growth in the late nineteenth century encouraged five physicians to open new practices in town. Two of these men—Lucius Newton Glenn (1873-1964) from the Crowder's Creek area and Mecklenburg County native James Marshall Sloan (1870-1926)—were subsequently among the founders of Gastonia's first hospital. J. M. Sloan graduated from Louisville Medical College in Kentucky and returned to North Carolina, where he settled in Gastonia in 1890 and travelled throughout the county as needed. L. N. Glenn began his practice in McAdenville in 1897 and moved to Gastonia in 1903.<sup>6</sup>

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<sup>6</sup> Robert Allison Ragan, *The History of Gastonia and Gaston County, North Carolina* (Charlotte: Loftin & Company, 2010), 289.

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In 1908, Drs. Glenn and Sloan partnered with Gastonia drugstore owner Frost Torrence and physicians McTyeire G. Anders and H. M. Eddleman to establish a hospital. The men contributed \$200 each and secured \$1,300 in loans to equip the facility, which initially occupied a former boarding house with ten rooms on West Airline Avenue opposite Gastonia's Southern Railway station. The hospital and the associated nurses' training school moved to the third, fourth, and part of the fifth floors of the Realty Building on West Main Avenue (Downtown Gastonia Historic District, NR 2004) in 1911, but soon required additional space.<sup>7</sup>

In 1923, the hospital's board of directors, which consisted of Fred L. Smyre, A. G. Myers, Thomas Lee Wilson, and Drs. Glenn and Sloan, began planning for the construction of a new hospital. Gastonia cotton merchant David M. Jones assisted with the institution's reorganization and facilitated the construction of the new building. The hospital board purchased two lots on North Highland Street for \$14,000 and the *Manufacturers Record*, which reported new construction throughout the South, announced prolific Columbia, South Carolina architect Charles Coker Wilson had been awarded the design contract for the "City Hospital Ward." The Palmer-Spivey Company, a Charlotte-based general contractor, erected the four-story Classical Revival-style edifice at a cost of \$162,000. The fireproof hospital was sheathed in variegated brick manufactured in Kingsport, Tennessee.<sup>8</sup>

At the time the hospital opened, the first floor included administrative and doctors' offices, examination rooms, three private patients' rooms, a kitchen and dining room, and storage rooms. The second and third floors housed patients, while the fourth floor encompassed x-ray and operating rooms and the maternity ward. The building featured "commodious sun-parlors" on the north and south elevations, designed so that copper screens could be inserted in the window openings during warm weather and glazed windows during the winter. Other amenities included the most up-to-date sterilizing plant, x-ray, laboratory, and operatory equipment; emergency gas lighting; blanket warmers; linen and trash chutes; a dumb-waiter system; telephone service in every room; and steam heat.<sup>9</sup>

Drs. Sloan and Glenn continued to practice at the new location, which was intended to accommodate forty-six patients. The physicians' reputation as skilled surgeons led the Southern, Piedmont and Northern, and Chicago and Northwestern railways to designate the institution as their surgical hospital.

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<sup>7</sup> Ibid., 331; Joseph H. Separk, *Gastonia and Gaston County, North Carolina, 1846-1949* (Gastonia: Joseph Separk, 1949), 143.

<sup>8</sup> Ragan, *The History of Gastonia and Gaston County*, 331; Separk, *Gastonia and Gaston County*, 143-144; John E. Wells, "Charles C. Wilson," *North Carolina Architects and Builders: An Autobiographical Dictionary*, <http://ncarchitects.lib.ncsu.edu/people/P000506>, 2010; *Manufacturers Record: A Weekly Southern Industrial, Railroad, and Financial Newspaper*, Baltimore, Maryland, February 8, 1923; "Hospital Involved with Years of Struggle," *The Gastonia Gazette*, April 30, 1977, page H4.

<sup>9</sup> "City Hospital, Built at Cost of \$160,000, One of States's Best," *The Gastonia Gazette*, March 8, 1924, North Carolina Collection Clipping File through 1975, Wilson Library, UNC-Chapel Hill.



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Jessie Maxwell Heaton, the first nurse to graduate from City Hospital's training school, remained the hospital's superintendent, a position she held from May 10, 1920 until her retirement on April 1, 1946. She also served as a surgical assistant and laboratory technician. Mary Lineberger was the assistant hospital superintendent. In addition to their other duties, the women facilitated the nursing school's operation in conjunction with the hospital. Fourteen nurses attended classes five nights a week in March 1924.<sup>10</sup>

City Hospital was in dire need of additional space by the 1940s. The facility, which then had a capacity of seventy-nine patients, was sometimes so overcrowded that beds and cribs lined the halls. In hopes that public ownership would provide the means to improve conditions, Gaston American Legion Post No. 23, under the leadership of Commander Brown W. Wilson, coordinated a fundraising effort and purchased City Hospital from Dr. Glenn and his associates in 1946. Numerous individuals and organizations including the Gaston County Medical Society contributed to the hospital acquisition fund. The American Legion conveyed the property to Gaston County after changing the name to Gaston Memorial Hospital in honor of the county's approximately 330 World War II veterans, including Commander Wilson. A nonprofit corporation with a twelve-member board of trustees oversaw the hospital's management.<sup>11</sup>

The new hospital administration immediately pursued accreditation for the nursing school, hiring Presbyterian College of Charlotte graduate Nancy Jenkins in September 1946 to organize a three-year program leading to registered nurse certification. The Gaston Memorial Hospital School of Nursing officially opened on January 15, 1947 under the direction of Clara Krueger and actively recruited high school graduates between the ages of eighteen and thirty to the three-year program. Tuition was free, although students paid an average of seventy dollars for textbooks. The nursing school provided lodging in the newly constructed dormitory, board, uniforms, and laundry service at no charge as well as a fifteen-dollar monthly allowance for each student's incidental expenses. In return, the young women worked six days (forty-eight hours) per week in addition to attending classes. After completing thirty months of classes and practical training in Gastonia, the students moved to Bellevue Hospital in New York, where they studied for the six months prior to their final examinations.<sup>12</sup>

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<sup>10</sup> Ibid.; Ragan, *The History of Gastonia and Gaston County*, 331; Separk, *Gastonia and Gaston County*, 143-144. Mrs. Heaton graduated from City Hospital's nursing school in 1910. "Mrs. Heaton Retires after 26 Years as Superintendent of City Hospital," *The Gastonia Daily Gazette*, May 17, 1946, page 2.

<sup>11</sup> "Hospital Drive is Going Well," *The Gastonia Daily Gazette*, January 31, 1946, page 1; Everett J. Jones, "Major W. D. Lawson Heads Gaston Post 23 American Legion, One of Largest Posts in Entire United States," *The Gastonia Gazette Centennial Edition*, October 5, 1946, Section 3, page 27; "Some Questions and Answers about Gaston Memorial Hospital and its New, Proposed Expansion," *The Gastonia Gazette*, March 23, 1949, page 10; Florence Young, "Illness in Family Brings Greater Realization of Need of Hospitals," *The Gastonia Gazette*, April 7, 1949, page 11; Gaston County Medical Society, "We've Come a Long Way," *The Gastonia Gazette*, September 28, 1951, page A5.

<sup>12</sup> "Miss Jenkins is Organizing Nursing School," *The Gastonia Daily Gazette*, September 11, 1946, page 1; "Memorial Hospital to Start Nursing Class," *The Gastonia Gazette*, April 25, 1947, page 6; "Gaston Memorial Nursing School Seeking Students," *The Gastonia Gazette*, July 8, 1947, page 5.

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The two-story dormitory behind the hospital housed students from 1947 until 1957, when a new residence hall was erected. The original building then served as hospital offices. Gastonia manufacturing companies including Textiles Incorporated and Threads Incorporated supported the education of young women with families employed at their mills by establishing nursing scholarships in 1960. The Gaston Memorial Hospital School of Nursing graduated 307 women by the time it closed in 1973.<sup>13</sup>

A statewide initiative to update North Carolina's medical facilities began in 1945 in response to the Medical Care Commission's findings that most hospitals were inadequate. The Hill-Burton Act, a federal law enacted in 1946 and also known as the Hospital Survey and Construction Act, provided the means to facilitate hospital improvements nationally through a federal grant and loan program. The North Carolina General Assembly supplied matching funds in 1947 and 1949, and the North Carolina Medical Care Commission delineated statewide needs, determining that thirty-three counties had no hospitals and more than fifty percent of the state's counties contained insufficient facilities. With a goal of providing convenient and affordable treatment to all residents, regardless of their location or ability to pay for care, the Medical Care Commission created 103 hospital districts and approved 57 hospital expansion or construction projects under the auspices of the Good Health Plan by June 30, 1951. Communities including Lenoir, Burlington, North Wilkesboro, Smithfield, Greenville, Laurinburg, and Albemarle erected new 100-bed hospitals, most of which were executed in a streamlined Modern architectural style in an attempt to convey the most up-to-date image.<sup>14</sup>

The Hill-Burton Act also provided financing for the construction of small community health centers and nurses' residences. Local municipal and county governments were required to provide funds to supplement the federal and state construction grants and loans, as well as to demonstrate their ability to maintain the proposed facilities. In addition to these initiatives to improve physical plants, the North Carolina General Assembly sponsored the University of North Carolina at Chapel Hill's medical school expansion and established a revolving loan program to subsidize the salaries of young medical, dental, and nursing school students who made commitments to practice in rural areas for four years.<sup>15</sup>

The Good Health Plan's success depended upon the collaborative efforts of medical professionals, community and political leaders, and private citizens. Big band leader Kay Kyser recorded a song called

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<sup>13</sup> "Historical Sketch," Gaston Memorial Hospital School of Nursing Yearbook, 1973, shared with Tim Ellis by Deborah Lewis Ogden, accessed online at [http://www.vintagegastonia.com/LOST\\_AND\\_ENDANGERED.php](http://www.vintagegastonia.com/LOST_AND_ENDANGERED.php); "Two \$500 Nurse Scholarships Given Annually," *Textiles Review*, March 1, 1960, page 1.

<sup>14</sup> Marjorie Hunter, "Rural Areas Benefit Most from Big Hospital-Building Program," *Raleigh News and Observer*, Annual Farm Edition, February 20, 1950, page 20; *North Carolina Almanac* (Raleigh: Almanac Publishing Company, 1952-1953), 515-516; Medical Foundation of North Carolina, fundraising brochure, 1953.

<sup>15</sup> Ibid.

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“It’s All Up To You” with Frank Sinatra and Dinah Shore to generate public support for the plan and the tune dominated radio station playlists.<sup>16</sup> Private donations were a significant component of the initiative.

Gaston County residents’ fundraising campaign to match the federal and state funding allocated for the construction of a new wing at Gaston Memorial Hospital eventually contributed about \$300,000 of the \$1.2-million project cost. Walter Hook and Associates of Charlotte designed the four-story Modernist building and Robert S. Ormand of Bessemer City served as supervising architect. Gaston County awarded the construction contracts to Barger Construction Company of Mooresville (general contractor), Joe K. Mace Company of Hendersonville (heating, ventilating, and plumbing), Gaston Electrical Company of Gastonia, and Westinghouse Electric Corporation of Charlotte (elevator installation).<sup>17</sup>

When completed in 1951, the new 150-bed hospital featured five “scientifically-equipped” operating rooms, private and semi-private rooms for up to four patients, central nursing stations on each floor, a fourth-floor maternity ward with three nurseries, a laboratory, an x-ray department, a medical library, and a kitchen. The first floor offered amenities including a large waiting room, a soda shop, and a pharmacy. The 1924 hospital’s interior was renovated after patients were moved to the new facility.<sup>18</sup> Fred C. Hubbard Jr. served as the hospital administrator at the time of the new building’s opening, supervising personnel including surgeons, physicians, nurses, technicians, pharmacists, and dieticians he deemed “the most competent and conscientious that could be found in any hospital.” By 1955 the hospital staff included more than seventy physicians and fifty nurses.<sup>19</sup>

Gaston Memorial Hospital was enlarged in 1957 by the construction of a four-story brick addition that connected the 1924 and 1951 hospital buildings. Patient rooms flanked the central corridors of the upper three floors, expanding the hospital’s capacity by thirty beds. A one-story wing was erected on the 1951 building’s south elevation at the same time, creating a new emergency room suite. R. H. Pinnix Construction Company of Gastonia served as the general contractor for the approximately \$205,000 project, which also included renovations to the 1951 building’s kitchen and other departments. The

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<sup>16</sup> Dick Broom, *Jubilee: North Carolina Memorial Hospital UNC School of Medicine, A 50-Year Illustrated Retrospective* (Chapel Hill: Medical Foundation of North Carolina, 2002), 13.

<sup>17</sup> “Front View by Architect of Proposed Hospital,” *The Gastonia Gazette*, April 6, 1949, page 1; “Grading Equipment Used on Hospital Site Work,” *The Gastonia Gazette*, November 9, 1949, page 2; “Gaston Memorial Hospital,” American Legion Post 23 Junior Baseball Championship Program, 1950, courtesy of Tim Ellis, accessed online at [http://www.vintagegastonia.com/LOST\\_AND\\_ENDANGERED.php](http://www.vintagegastonia.com/LOST_AND_ENDANGERED.php);

<sup>18</sup> “Ceremonies Saturday Open Hospital,” *The Gastonia Gazette*, September 28, 1951, page A1; “Hospital Operating Rooms are Scientific and Safe,” *The Gastonia Gazette*, September 28, 1951, page A10; Bob Hallman, “Gaston Memorial Almost Finished,” *The Gastonia Gazette*, March 21, 1951, pages A1 and 8.

<sup>19</sup> Fred C. Hubbard Jr., “Administrator Lauds Section on Facilities,” *The Gastonia Gazette*, September 28, 1951, page A1; “Gaston Memorial’s Saga Monument to Public,” *The Gastonia Gazette*, February 21, 1955.

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former operating suite on the 1924 building's fourth floor was converted into a physical therapy department.<sup>20</sup>

In February 1957, soon after the addition was completed, the Duke Endowment awarded Gaston Memorial Hospital a \$50,000 grant toward the construction of a new nursing school across the road from the hospital at 416 North Highland Street. These funds, in conjunction with a Ford Foundation grant and state and federal allocations, subsidized the new facility's \$410,000 cost. The building encompassed classrooms, laboratories, dormitory rooms, a lounge, an assembly room, a library, and a kitchen. Nursing students moved into the facility in December 1957. Edna Perry served as the school's director and Louise Taylor oversaw the nurse education program at that time.<sup>21</sup>

Gaston Memorial Hospital hired three African American nurses, the first to be employed by the institution, in 1963. Registered nurse Edna Jarvis graduated from Columbia General Hospital's nursing school in South Carolina, while licensed practical nurses Mary Charles Moore and Barbara Love were educated at a Charlotte nursing school.<sup>22</sup>

Gaston County leaders began to plan for the construction of a new hospital in 1966, and a nine-story, 479-bed facility was completed at in 1973.<sup>23</sup> The county enclosed the windows in the hospital's 1924 wing and the 1947 nurses' dormitory shortly after 1973 to facilitate their new use of the space. The North Highland Street facility then housed the Gaston-Lincoln Mental Health Inpatient Clinic as well as other county departmental offices (Rural Police and Detectives, Probation and Parole, Transportation, Emergency Services, Recreation and Parks, Civil Defense, Fire Marshall, State Alcoholic Beverage Control Board) until 2005.<sup>24</sup>

The Landmark Group and Rehab Builders began the adaptive reuse of the City Hospital – Gaston Memorial Hospital complex to serve as affordable housing in August 2011.

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<sup>20</sup> Ray Jimison, "Hospital Project to Cost \$205,113," *The Gastonia Gazette*, May 30, 1956, pages 1 and 10; "Taking Down to Build Up," *The Gastonia Gazette*, August 16, 1956, page 7; "Added Beds at Gaston Memorial are Booked Up," *The Gastonia Gazette*, July 20, 1957, page 8; "Hospital Here Opens Another Department," *The Gastonia Gazette*, October 29, 1957, page 6.

<sup>21</sup> Ray Jimison, "Sod Broken for Nursing School," *The Gastonia Gazette*, January 24, 1957, pages 1 and 2; "GMH Receives \$50,000 Gift," *The Gastonia Gazette*, February 4, 1957, page 1; "Nurse School Bids Opened," *The Gastonia Gazette*, July 16, 1957, page 1; "Nurses to Move into New Home Friday Afternoon," *The Gastonia Gazette*, December 17, 1957, page 7. The 1957 Nurses School is intact and now serves as a nursing home.

<sup>22</sup> "3 Negro Nurses to Join GMH Staff," *The Gastonia Gazette*, April 3, 1963, page B1.

<sup>23</sup> David Huffstetler, "Hospital Dedication Set Sunday," *The Gaston Independent*, November 29, 1973, page B1.

<sup>24</sup> Jack Kiser, City of Gastonia, conversation with Heather Fearnbach on October 28, 2010; *Gastonia City Directories* (Richmond: Hill Directory Company, 1974-2005).

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## North Carolina's Early-Twentieth-Century Hospital Context

The North Carolina Medical Society commissioned High Point physicians J. T. Burrus and H. W. McCain to survey the state's hospitals in 1913. Their 1917 report identified eleven hospitals established in North Carolina before 1895 and sixty-five hospitals in operation by 1916. The vast majority (fifty-four) of those facilities were "stock" hospitals, which were chartered and owned by physicians rather than secular, religious, or military entities. A board of trustees provided management oversight and vetted hospital staff. Three facilities—Charlotte's Presbyterian Hospital, Wilmington's James Walker Memorial Hospital, and the Washington Hospital (which became Beaufort General Hospital)—handled notably large numbers of surgeries.<sup>25</sup>

North Carolina's burgeoning economy supported the construction of many new hospitals and the expansion of existing facilities in the 1920s. By 1926, 153 hospitals in fifty-nine counties served the state's residents. However, access to convenient and affordable medical care was still particularly problematic for rural dwellers, and the ratio of doctors to patients was extremely low—only one physician to every 1,500 people according to University of North Carolina survey.<sup>26</sup>

## Gastonia Hospital Context

City Hospital/Gaston Memorial Hospital (1908) was the first of five Gastonia hospitals—the Gaston Sanatorium/Garrison General Hospital (1917), the North Carolina Orthopedic Hospital (1921), and two hospitals that served Gaston County's African American residents (1919 and 1937)—that functioned during the twentieth century. The Gaston Memorial Hospital complex on Court Drive, completed in 1973, is the only facility still in operation.

## **Gaston Sanatorium - Garrison General Hospital**

Dr. D. A. Garrison purchased the dwelling at 206 West Long Avenue in 1917 and, after renovating the building, opened an eight-bed hospital and nurses' training school known as the Gaston County Sanatorium. Garrison served as president of the hospital corporation, which consisted of vice-president L. N. Patrick and secretary H. F. Glenn, who were also physicians and stockholders in the company. The hospital staff included doctors from Gastonia and northern South Carolina. A two-story addition was built after a fire, increasing the hospital's capacity to twenty-two beds, and a six-room nurses' home was erected next door. Garrison tripled the institution's size in 1925 through the construction of a four-story,

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<sup>25</sup> Warner L. Wells, "Pioneer Hospitals in North Carolina," in *Medicine in North Carolina: Essays in the History of Medical Science and Medical Service, 1524-1960*, ed. Dorothy Long (Raleigh: The North Carolina Medical Society, 1972), 280-283.

<sup>26</sup> News Letter, July 7, 1926, vol. XII, no. 34 (Chapel Hill: University of North Carolina, 1926). Statistics quoted in the National Register nomination for Mary Elizabeth Hospital in Raleigh, prepared by Carrie Ehrfurth in 2008.

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brick, sixty-bed hospital designed by the Gastonia architecture firm of White, Streeter, and Chamberlain.<sup>27</sup>

The Duke Endowment began managing the hospital in 1935, established a board of trustees, and changed the facility's name to Garrison General Hospital in honor of Dr. Garrison, who remained the chief of staff and a partial owner of the hospital property. In 1952, the hospital was the third-largest in Gastonia with 52 beds and 18 bassinets. The institution closed in 1976 and conveyed the property to the Gaston College Board of Trustees in 1977.<sup>28</sup> The building was subsequently demolished.

## North Carolina Orthopedic Hospital

Although Gastonia businessman Robert B. Babington Sr. began planning for the North Carolina Orthopedic Hospital in 1909, the facility on South New Hope Road did not open until 1921. Funded by state appropriations and grants from Benjamin J. Duke, who sponsored a building for African American patients, and Edward T. Latta, the hospital provided free treatment for North Carolina children suffering from polio and other incapacitating diseases. Dr. Oscar L. Miller was the hospital's head surgeon from 1921 until 1932. Dr. William McKinley Roberts joined the staff in 1927 and served as chief surgeon from 1932 until 1966. The North Carolina Orthopedic Hospital contained 160 beds (110 white and 50 African American) in 1952. Although the facility was the first and remained one of the South's largest institutions of its type, the development of a polio vaccine in 1954 greatly reduced the need for the hospital. The complex was integrated in 1966 in response to a charge of inferior facilities for African American patients. Declining occupancy rates resulted in the institution's closure on June 30, 1979.<sup>29</sup>

The majority of the approximately twenty-six-acre complex now functions as offices, but two of the seven extant edifices erected in 1920 serve as an assisted living facility. Although most of the original hospital buildings display austere Classical Revival-style elements, the two-story brick administration building features an imposing, full-height, semi-circular entrance portico supported by robust Tuscan columns, a tall modillion cornice, and a central entrance bay that was parged and scored to look like stone. The property also encompasses three dwellings built around 1900 that have been converted to offices and two garage/service buildings constructed in 1960.<sup>30</sup>

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<sup>27</sup> Separk, *Gastonia and Gaston County*, 146-147.

<sup>28</sup> Ibid.; *North Carolina Almanac*, 1952-1953, page 51; Jim Atkins, ed., *Gastonia Centennial Commemorative Book, 1877-1977* (Gastonia: Gastonia Centennial Celebration, Inc., 1977), page 42.

<sup>29</sup> Separk, *Gastonia and Gaston County*, 147-149; *North Carolina Almanac*, 1952-1953, page 518; Ragan, *The History of Gastonia and Gaston County*, 393-394; North Carolina Department of Cultural Resources, "North Carolina Orthopedic Hospital," State Marker Text, 2009, [www.ncmarkers.com](http://www.ncmarkers.com).

<sup>30</sup> Building construction date information from Gaston County property record cards accessed online at <http://egov1.co.gaston.nc.us>. Some sources credit London-born architect William H. Peeps, who established a Charlotte, North Carolina practice in 1912, with the design of some of the 1920 buildings, but more information is needed in order to make a

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Gaston County, NC**Gastonia's African American Hospitals**

Dr. Herbert Jones Erwin Sr. (1879-1946) established a Gastonia medical practice in 1909, serving African American patients from western North Carolina and northern South Carolina. After soliciting donations from the community, he erected a two-story brick hospital at 725 North Falls Street around 1919 and employed Cora Johnson as the head nurse. In late 1937, a one-story, brick, twenty-two bed hospital for Gaston County's African American residents funded by the county, the Duke Endowment, and private contributions opened opposite Dr. Erwin's hospital at 721 N. Marietta Street. The new facility cost \$48,000, including equipment. African American physicians and nurses treated patients under the supervision of Ellen Simpson, who became the facility's superintendent in 1938 and continued in that position until July 1954. The board of trustees selected Betty Fay Connor, who had previously served as Gaston Memorial Hospital's night supervisor, to take Mrs. Simpson's place. An addition completed in March 1950 increased the hospital's capacity to thirty-five beds. A new operating room, maternity ward, nursery, and storage rooms were created within the existing building at the same time. A medical laboratory and an X-ray department were added as part of the hospital's \$30,000 renovation in 1962. The building has functioned as a retirement home since the Gaston County hospital system was desegregated.<sup>31</sup> The 1925 hospital is also extant but has been utilized as a residence for many years.

**Architectural Context**

Most North Carolina hospitals operating during the early twentieth century were privately-funded institutions and few were housed in buildings erected specifically to serve as medical facilities. By the 1920s, however, hospitals, like consolidated schools and other public edifices, reflected new design standards intended to result in buildings that were commanding in appearance as well as fireproof and hygienic. H, U, and T-shaped floor plans allowed for large windows, often paired or grouped in wide bands, to illuminate and ventilate interior spaces. The new buildings also encompassed central heating plants and multiple bathrooms, amenities that were not present in many earlier institutional buildings.

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definitive attribution. James Vaseff and Catherine W. Bishir, "William H. Peeps," August 2011 draft entry for North Carolina Architects and Builders: An Autobiographical Dictionary.

<sup>31</sup> Separk, *Gastonia and Gaston County*, 149; Mary Hill Gaston, "Negro Hospital Closes Ten Years of Service This Week," *The Gastonia Daily Gazette*, November 13, 1946; "Garland Resigns as Member of Gaston Negro Board," *The Gastonia Gazette*, February 22, 1950; Bill Williams, "Addition and Improvements to Gaston County Negro Hospital Add Greatly to Its Efficiency," *The Gastonia Gazette*, March 28, 1950; "Gaston Negro Hospital Gets New Superintendent Thursday," *The Gaston Citizen*, June 30, 1954; "Ushers Union Gives Oxygen Tent to Hospital," *The Gastonia Gazette*, August 12, 1954; Ray Jimison, "Gaston Negro Hospital Goes Modern," *The Gastonia Gazette*, May 23, 1962, page A9; Emily and Lara Ramsey, "First Gaston County Colored Hospital," and "Former Gaston County Negro Hospital," survey file narratives, 2001, on file at the State Historic Preservation Office in Raleigh.



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Most displayed Classical Revival-style features, a popular choice since the turn of the twentieth century for buildings intended to symbolize “democratic ideals, inspire patriotism, and elevate public taste.”<sup>32</sup>

J. T. Burrus and H. W. McCain’s 1917 report on North Carolina hospitals included photographs of fifty-eight buildings of disparate appearance. Surgeon Warner Wells analyzed the images in 1972 and concluded that fifteen facilities occupied residences that had been adapted for use as hospitals, twelve had a “conventional sanatorium design,” and four (including Gastonia’s City Hospital) were located on the upper floors of commercial buildings. Institutions such as Durham’s Watts Hospital and Raleigh’s Rex Hospital had H- or E-shaped plans that provided maximal light and air circulation and encompassed open wards or “pavilions” intended to house patients with the same disease, thus discouraging the spread of infection. The pavilion plan, first employed in mid-nineteenth century France and England and promoted by nurse Florence Nightingale, remained common through the 1930s, although the more compact block plan, which featured smaller patient rooms flanking central corridors, was also popular during the period. Block-plan hospitals allowed for efficient staff interaction, increased patient privacy, and reflected a focus on medical technology rather than building form as the mechanism of patient healing. Such facilities were executed in a variety of architectural styles including Classical, Colonial, and Renaissance Revival. North Carolina’s early-twentieth-century examples included the Classical Revival-style hospitals in Burlington, Elizabeth City, and Morehead City designed by architect Charles C. Benton of Wilson. Both pavilion- and block-plan facilities reflected a concern with “fastidious and universal cleanliness” as promoted by hospital sanitation expert John Simon, who stressed that sterile conditions and ample ventilation were critical components of patient care.<sup>33</sup>

Columbia, South Carolina architect Charles Coker Wilson’s design for the four-story City Hospital erected on North Highland Street in 1923-1924 manifests classical architectural elements that evoke a sense of tradition and permanence. The imposing brick edifice features a metal cornice with a tall frieze below square modillions, a flat-roofed east entrance portico supported by paired Tuscan columns, and slightly-recessed round-arched window surrounds on the façade’s first story. The North Carolina Orthopedic Hospital’s two-story brick administration building, erected in the 1920s, serves as another intact example of a Classical Revival-style edifice in a Gastonia medical complex. A dramatic, full-height, semi-circular portico shelters the main entrance and a tall modillion cornice and a cast-stone watertable wrap around the building.<sup>34</sup>

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<sup>32</sup> Catherine W. Bishir, *North Carolina Architecture*, portable edition (Chapel Hill: University of North Carolina Press, 2005), 457.

<sup>33</sup> Warner L. Wells, “Pioneer Hospitals in North Carolina;” Annmarie Adams, *Medicine By Design: The Architect and the Modern Hospital, 1893-1943* (Minneapolis: University of Minnesota Press, 2008), xvii-xix.

<sup>34</sup> C. C. Wilson operated a branch office in Gastonia from 1919 until 1925 that was headed by architect Hugh White from 1919 until 1921, when White and two partners established the Gastonia firm of White, Streeter, and Chamberlain. The *Manufacturers Record* attributes the “City Hospital Ward” commission to Wilson. The architect of the North Carolina Orthopedic Hospital’s administration building is unknown. White, Streeter, and Chamberlain designed the Garrison Sanatorium

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Many hospitals had associated nursing schools, and, whenever possible, separate dormitories located on the grounds provided students with quiet, convenient, and private residential space. Nursing and education, which were among the few professional career opportunities available to women through the early twentieth century, perpetuated women's traditional roles as nurturers and teachers while allowing for autonomy and the opportunity for women to work outside the home. The rigorous demands of academic coursework and practical training left little time for young women to run a household, making residential dormitories a perfect solution.

Nurses' residences typically encompassed an apartment for the school superintendent, reception areas, a dining room, a kitchen, classrooms, and dormitory rooms.<sup>35</sup> These buildings were usually erected in an architectural style in keeping with the adjacent hospital. In the case of the Gaston Memorial School of Nursing, the 1947 Nurses' School and Dormitory emulates the 1924 hospital's design in its Classical Revival features such as the tall metal cornice; the raised-panel door, five-pane sidelights, and fanlight within the main entrance's segmental-arched surround; and the brick quoins at the building's corners.

North Carolina hospital design changed dramatically in the late 1940s, when the Medical Care Commission evaluated facilities statewide and found that many 1920s buildings and austere depression-era edifices were unable to meet capacity demands given rapid postwar population growth. Utilizing federal grants and loans made available by the Hill-Burton Act and matching funds allocated by the North Carolina General Assembly and local governments in conjunction with public donations, 97 health care facilities in 60 counties were improved at a cost of \$47 million between 1947 and 1951. The majority of these projects (57) involved the construction of new hospitals.<sup>36</sup>

Changes in medical technology, theory, and practice coalesced with the desire for a fresh, progressive image for the new facilities and led to consultation with architects who were undoubtedly influenced by the Modernist principles espoused by leaders of the International Style movement, so called given its European genesis and subsequent diffusion throughout the world. Architects including Walter Gropius and Ludwig Mies van der Rohe of Germany, Le Corbusier of France, and J. J. P. Oud of Holland designed buildings distinguished by planar surfaces and cubic volumes rather than mass, regularity rather than symmetry (in structure and fenestration), and architectural detail rather than applied ornament.<sup>37</sup> The International Style proved more popular in commercial and institutional than residential applications in

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(1925), the African American wards at the North Carolina Orthopedic Hospital (1926, 1930), and Gaston County's African American hospital and the associated nurses' home (1937).

<sup>35</sup> W. Gill Wylie, *Hospitals: Their History, Organization, and Construction* (New York: D. Appleton and Company, 1877), 162-163.

<sup>36</sup> *North Carolina Almanac*, 1952-1953, page 515.

<sup>37</sup> Henry-Russell Hitchcock, Jr. and Philip Johnson. *The International Style: Architecture since 1922* (New York, W. W. Norton & Company, 1932), 20.

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the United States, as flat roofs, sleek surfaces, and angular lines were often perceived as being impersonal and harsh.

The hospital construction boom initiated by the Hill-Burton Act coincided with the 1948 creation of the School of Design at North Carolina State College in Raleigh. University of Oklahoma architecture program head Henry Kamphoefner, a strong proponent of Modernist architecture, became the school's first dean. Drawn by North Carolina's progressive reputation, Kamphoefner recruited George Matsumoto, James Walter Fitzgibbon, Edward W. Waugh, and several other University of Oklahoma-Norman faculty members and students to move to Raleigh with him. School of Design professors and visiting lecturers including Frank Lloyd Wright, Walter Gropius, and Mies van der Rohe had a significant impact on North Carolina's mid-century built environment, both through the buildings they designed and the students they trained.<sup>38</sup>

Some mid-twentieth-century North Carolina medical facilities, such as the 1958 Presbyterian Hospital in Charlotte and the Northrup and O'Brien-designed University of North Carolina at Chapel Hill Hospital were Classical Revival in style, but the vast majority reflected the influence of the Modernist aesthetic as well as the progressive thinking and optimism of the era in their use of new materials, construction techniques, and spatial arrangements. A two-page collage in a fundraising brochure published by the Medical Foundation of North Carolina around 1953 illustrates sixteen Modernist hospitals, but the facility locations are only visible on a few: Alamance, High Point Memorial, Kinston Memorial, and Bertie County Memorial. Barger Construction Company of Mooresville, who served as the general contractor for the 1951 Gaston Memorial Hospital building, also erected the Modernist Memorial Mission Hospital and Nurses Home (1954) and Highland Hospital (1955) in Asheville. These buildings display sleek lines, smooth facades, flat-roofed entrance canopies, and the aluminum-framed plate-glass windows, doors, and curtain walls that characterize the Modernist design aesthetic. Materials including structural and spandrel glass, glass block, anodized aluminum, natural and cast stone, textured concrete masonry units, and long, thin Roman brick were used to embellish facades during this period.<sup>39</sup>

Walter Hook, the architect of Gaston Memorial Hospital's 1951 building, was the son of prolific Charlotte architect Charles Christian Hook. He partnered with his father in the firm Hook and Hook from 1924 until C. C. Hook's death in 1938, when he established his own company, Walter Hook and Associates. The firm specialized in medical building design until his 1963 death. Their health care facility commissions include the Veteran's Administration Hospital in Salisbury and Mercy Hospital, Carolinas

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<sup>38</sup> Ernest H. Wood III, "The Opportunities are Unlimited: Architects and Builders since 1945," in Bishir, Catherine, et al. *Architects and Builders in North Carolina* (Chapel Hill: UNC Press, 1990), 361-363.

<sup>39</sup> Historic photographs of Barger Construction Company's projects are available on their website at <http://www.bargerconstruction.com/history>.

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Medical Center, and Presbyterian Hospital in Charlotte.<sup>40</sup>

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<sup>40</sup> Michelle Ann Michael, "Charles Christian Hook," North Carolina Architects and Builders: An Autobiographical Dictionary, <http://ncarchitects.lib.ncsu.edu/people/P000211>, 2009.

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### **Section 10. Geographical Data**

#### **Verbal Boundary Description**

The boundaries of the City Hospital - Gaston Memorial Hospital complex are indicated by the bold line on the enclosed map. Scale 1" = 85'

#### **Boundary Justification**

The City Hospital - Gaston Memorial Hospital complex contains the 1924 City Hospital, the 1951 Gaston Memorial Hospital, the 1957 addition that connects them, as well as a 1947 nurses' school and dormitory. The boundaries encompass 2.49 acres historically associated with the hospital. Gaston County will retain ownership of the hospital's former flat-roofed, Modernist, brick power plant, a subsidiary 1960s building located at 816 West Mauney Avenue just west of the hospital complex, as well as the adjacent parking lots. The former power plant and the parking lots, which now serve as Gaston County's Central Transportation Access (motor pool), have thus been excluded from the National Register boundaries.

### **Section 11. Additional Documentation**

#### **Photo Catalog**

Photographs by Heather Fearnbach, 3334 Nottingham Road, Winston-Salem, NC, in October 2010 and September 2011. Digital images located at the North Carolina SHPO.

1. City Hospital, 1924, 401 North Highland Street, east elevation
2. Gaston Memorial Hospital, 1951, 405 North Highland Street; 1957 connector; 1924 City Hospital (right to left), east elevation, looking southwest
3. Gaston Memorial Hospital, 1951, north elevation, looking southwest
4. Gaston Memorial Hospital, 1951, southwest oblique
5. City Hospital, 1924, southwest oblique
6. City Hospital, 1924, third floor corridor, looking south
7. Gaston Memorial Hospital, 1951, lobby, looking northeast
8. Gaston Memorial Hospital, 1951, fourth floor, corridor between labor and delivery rooms, looking west
9. Nurses' School and Dormitory, 1947, 810 Mauney Avenue, southwest oblique
10. Nurses' School and Dormitory, northwest oblique
11. Nurses' School and Dormitory, first floor corridor, looking south